

No. W 58239

Due no later than January 31, 2009

Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

OTI CONSULTING, LLC
6850 HOLLILYNN DR
BOISE, ID 83709CHARLES L OLSON
6850 HOLLILYNN DR
BOISE, ID 83709NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MEMBER	CHARLES L. OLSON	6850 HOLLILYNN DR,	BOISE	ID	83709

5. Organized Under the Laws of:

IDAHO
W 58239

6.

Signature



Date

12/29/08

Name (Typed or Printed)

CHARLES L. OLSON

Title

MEMBER

Issued 11/05/2008

Do Not Tape or Staple

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